PATENT APPLICATION FEE DETERMINATION RECO Effective January 1, 2003									10	1-61	'フ ~	050	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL ENTITY OTHER TO					THAN
TO	TAL CLAIMS		G1		_ J.ul		ŗ	RATE	Ī	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC F	EE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			61 minus 20=		* 41		Ţ	X\$ 9=	=		OR	X\$18=	738
INDEPENDENT CLAIMS			12 minus 3 =		* 9		f	X42=			OR	X84=	75%
MUL	TIPLE DEPEN	DENT CLAIM PF						+140=			OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA	_	,	OR	L	2241
1			, 017		<u> </u>	1011	OTHER	THAN					
		LAIMS AS A (Column 1)		(Colur	mn 2)	(Column 3)	SMAL	SMALL ENTITY			SMALL	ENTITY	
ENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9	=		OR	X\$18=	
MEN	Independent	*	Minus	***		=		X42=	=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPEN				T CLAIM		1	+140	_		OR		
								TO	TAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)							addit. F	-EE		4	הטטוו. רבב	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDMENT	Total	*	Minus	**		=		X\$ 9	)=		OR	X\$18=	1
AMEN	Independent	*	Minus	***		=		X42:	=		OR	V04	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		<b>1</b>	+140	) <u> </u>		OR		
								TO	TAL	<u> </u>	OR	TOTAL	
	3 · · · · · · · · · · · · · · · · · · ·	(0.1		(O=1	ime C/	(Column 0)		ADDIT. F			<b>1</b> 04	ADDIT. FEE	£
		(Column 1) CLAIMS		HIG	umn 2) HEST	(Column 3)	<b>4</b> r		·	ADDI-	1		ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER /IOUSLY D FOR	PRESENT EXTRA		RAT	Έ	TIONAL FEE		RATE	TIONAL
NDW	Total	*	Minus	**		=	41	X\$ 9	}= {		OR	X\$18=	
\ME	Independent	*	Minus	***	IT C'	4 🗆	4	X42	<u> </u>		OR	X84=	
ال	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	)=		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	TOTA	L	
**	Wifthe "Highest No	umber Previously F umber Previously F mber Previously P	Paid For" IN TH	HS SPACE	E is less th	nan 3, enter "3."	,	ADDIT. I ound in th				ADDIT. FE	t <b>L</b>

Application or Docket Number